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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)** Declaration Submitted With Initial Filing

OR

 Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	13DV-13419
First Named Inventor	Thomas W. Birdwell
COMPLETE IF KNOWN	
Application Number	09/727,898
Filing Date	December 1, 2000
Art Unit	2171
Examiner Name	

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD OF PROCESSING TEST INFORMATION

(Title of the Invention)

the specification of which

 is attached hereto**OR** was filed on (MM/DD/YYYY) 12/01/2000 as United States Application Number or PCT InternationalApplication Number 09/727,898 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? Yes	Certified Copy Attached? No
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

 Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Number: **30540** OR Correspondence address below

Name

Address

City

State

ZIP

Country

Telephone

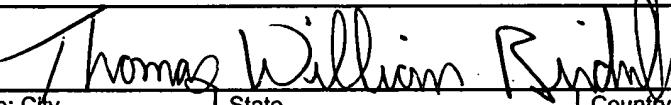
Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor

Given Name (first and middle [if any]) Thomas William	Family Name or Surname Birdwell
--	------------------------------------

Inventor's
Signature



Date

10 May 04

Residence: City Middletown	State Ohio	Country USA	Citizenship USA
-------------------------------	---------------	----------------	--------------------

Mailing Address
6031 Bendel Drive

City Middletown	State Ohio	ZIP 45044	Country USA
--------------------	---------------	--------------	----------------

NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor

Given Name (first and middle [if any]) Joseph Benjamin	Family Name or Surname Ross
---	--------------------------------

Inventor's
Signature

Date

Residence: City Cincinnati	State Ohio	Country USA	Citizenship USA
-------------------------------	---------------	----------------	--------------------

Mailing Address
4417 Bromyard Ave.

City Cincinnati	State Ohio	ZIP 45241	Country USA
--------------------	---------------	--------------	----------------

Additional inventors or a legal representative are being named on the **1** supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.



PTO/SB/02A (08-03)

Approved for use through 08/31/2003, OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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DECLARATION**ADDITIONAL INVENTOR(S)
Supplemental Sheet**

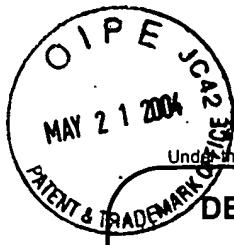
Page 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Ronald Cecil		McFarland	
Inventor's Signature			
Residence: City	Cincinnati	State	Ohio
Country	USA	Citizenship	USA
Mailing Address 7941 Fawncreek Drive			
Mailing Address			
City	Cincinnati	State	Ohio
Zip	45249	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Christopher Reynolds		Hammond	
Inventor's Signature			
Residence: City	Schenectady	State	NY
Country	USA	Citizenship	USA
Mailing Address 404 Deer Path			
Mailing Address			
City	Schenectady	State	NY
Zip	12306	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
Country		Citizenship	
Mailing Address			
Mailing Address			
City		State	
Zip		Country	

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Declaration
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(37 CFR 1.16 (e))
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METHOD OF PROCESSING TEST INFORMATION*(Title of the Invention)*

the specification of which

 is attached hereto**OR** was filed on (MM/DD/YYYY) 12/01/2000 as United States Application Number or PCT InternationalApplication Number 09/727,898 and was amended on (MM/DD/YYYY) (if applicable).

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Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? Yes	Certified Copy Attached? No
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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Number: **30540** OR Correspondence address below

Name

Address

City

State

ZIP

Country

Telephone

Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventorGiven Name
(first and middle [if any]) Thomas WilliamFamily Name
or Surname BirdwellInventor's
Signature

Date

Residence: City
MiddletownState
OhioCountry
USACitizenship
USAMailing Address
6031 Bendel DriveCity
MiddletownState
OhioZIP
45044Country
USA**NAME OF SECOND INVENTOR:** A petition has been filed for this unsigned inventorGiven Name
(first and middle [if any]) Joseph BenjaminFamily Name
or Surname RossInventor's
Signature

Date

5/5/04

Residence: City
CincinnatiState
OhioCountry
USACitizenship
USAMailing Address
4417 Bromyard Ave.City
CincinnatiState
OhioZIP
45241Country
USA

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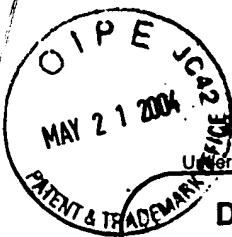
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PATENT & TRADEMARK

DECLARATION		ADDITIONAL INVENTOR(S) Supplemental Sheet
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Page 1 of 1		

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Ronald Cecil		McFarland	
Inventor's Signature			Date 5/5/04
Residence: City	Cincinnati	State	Ohio
Country	USA	Citizenship USA	
Mailing Address 7941 Fawn creek Drive			
Mailing Address			
City Cincinnati		State Ohio	Zip 45249
		Country USA	
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Christopher Reynolds		Hammond	
Inventor's Signature	Date		
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Country	USA	Citizenship USA	
Mailing Address 404 Deer Path			
Mailing Address			
City Schenectady		State NY	Zip 12306
		Country USA	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
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Inventor's Signature	Date		
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	Zip	Country

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Art Unit	2171
Examiner Name	

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NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventorGiven Name
(first and middle [if any]) Thomas WilliamFamily Name
or Surname BirdwellInventor's
Signature

Date

Residence: City
MiddletownState
OhioCountry
USACitizenship
USAMailing Address
6031 Bendel DriveCity
MiddletownState
OhioZIP
45044Country
USA**NAME OF SECOND INVENTOR:** A petition has been filed for this unsigned inventorGiven Name
(first and middle [if any]) Joseph BenjaminFamily Name
or Surname RossInventor's
Signature

Date

Residence: City
CincinnatiState
OhioCountry
USACitizenship
USAMailing Address
4417 Bromyard Ave.City
CincinnatiState
OhioZIP
45241Country
USA

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PTO/SB/02A (08-03)
Approved for use through 08/31/2003. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

Page 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)		Family Name or Surname	
Ronald Cecil		McFarland	
Inventor's Signature		Date	
Residence: City	Cincinnati	State	Ohio
Country	USA	Citizenship	USA
Mailing Address 7941 Fawn creek Drive			
Mailing Address			
City	Cincinnati	State	Ohio
Zip	45249	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)		Family Name or Surname	
Christopher Reynolds		Hammond	
Inventor's Signature		Date	5/4/2004
Residence: City	Schenectady	State	NY
Country	USA	Citizenship	USA
Mailing Address 404 Deer Path			
Mailing Address			
City	Schenectady	State	NY
Zip	12306	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
Country		Citizenship	
Mailing Address			
Mailing Address			
City		State	
Zip		Country	

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Handwritten signature over stamp
PTO/SB/81 (09-03)
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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	09/727,898
Filing Date	December 1, 2000
First Named Inventor	Thomas William Birdwell
Title	Method of Processing Test Information
Art Unit	2171
Examiner Name	
Attorney Docket Number	13DV-13419

I hereby appoint:

Practitioners associated with the Customer Number:

30540

OR

Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

The address associated with the above-mentioned Customer Number:

OR

The address associated with Customer Number:

OR

<input type="checkbox"/>	Firm or Individual Name
Address	
Address	
City	State
Country	Zip
Telephone	Fax

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name	Thomas William Birdwell
Signature	<i>Thomas William Birdwell</i>
Date	13 May 04
Telephone	(513)539-7411

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

*Total of 4 forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Examiner Name	
Attorney Docket Number	13DV-13419

I hereby appoint:

 Practitioners associated with the Customer Number:

30540

OR

 Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

 The address associated with the above-mentioned Customer Number:

OR

 The address associated with Customer Number:

OR

<input type="checkbox"/>	Firm or Individual Name			
Address				
Address				
City			State	Zip
Country				
Telephone			Fax	

I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

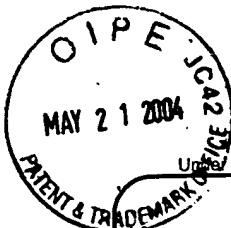
Name	Joseph Benjamin Ross		
Signature			
Date	5/5/04	Telephone	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

 *Total of 4 forms are submitted.

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and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	09/727,898
Filing Date	December 1, 2000
First Named Inventor	Thomas William Birdwell
Title	Method of Processing Test Information
Art Unit	2171
Examiner Name	
Attorney Docket Number	13DV-13419

I hereby appoint:

 Practitioners associated with the Customer Number:

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I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

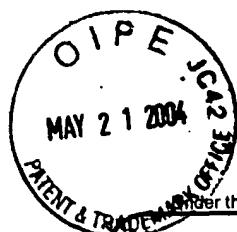
Name	Ronald Cecil McFarland	
Signature		
Date	5/5/04	Telephone

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SIGNATURE of Applicant or Assignee of Record

Name	Christopher Reynolds Hammond		
Signature			
Date	5/4/2007	Telephone	518-387-6960

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